



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicant: Yoichi ISHIDA et al.
Title: DISK DRIVE SYSTEM
Prior Appl. No.: 09/736,368
Prior Appl. Filing Date: 12/15/2000
Examiner: Unassigned
Art Unit: 2653

CONTINUING PATENT APPLICATION
TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

☐ Continuation ☒ Division ☐ Continuation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

Enclosed are:

- ☒ Application Data Sheet (37 CFR 1.76) (3 pages).
- ☒ Specification, Claim(s), and Abstract (39 pages).
- ☒ Formal drawings (7 sheets, Figures 1-14).
- ☒ Declaration and Power of Attorney (2 pages).
- ☒ Information Disclosure Statement (3 pages).



13281 U.S. PTO

Atty. Dkt. No. 040405-0366

☒ Form PTO-1449 with copies of 0 listed reference(s).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$770.00		\$770.00
Total	22	-	20	=	2	x	\$18.00	=	\$36.00
Claims:									
Independ	1	-	3	=	0	x	\$86.00	=	\$0.00
ents:									
If any Multiple Dependent Claim(s) present:						+	\$290.00	=	\$0.00
							SUBTOTAL:	=	\$806.00
<input type="checkbox"/>							Small Entity Fees Apply (subtract 1/2 of above):	=	\$0.00
							TOTAL FILING FEE:	=	\$806.00

- ☒ A check in the amount of \$806.00 to cover the filing fee is enclosed.
- ☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: February 13, 2004

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By

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